

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/008,610 -Conf #2486</td> </tr> <tr> <td>Filing Date</td> <td>11-08-2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Patrick Aebischer</td> </tr> <tr> <td>Title</td> <td>LENTIVIRAL-MEDIATED GROWTH FACTOR GENE THERAPY FOR NEURODEGENERATIVE DISEASES</td> </tr> <tr> <td>Art Unit</td> <td>1636</td> </tr> <tr> <td>Examiner Name</td> <td>GUZO, DAVID</td> </tr> <tr> <td>Attorney Docket No.</td> <td>2204437.127 US1</td> </tr> </table>	Application Number	10/008,610 -Conf #2486	Filing Date	11-08-2001	First Named Inventor	Patrick Aebischer	Title	LENTIVIRAL-MEDIATED GROWTH FACTOR GENE THERAPY FOR NEURODEGENERATIVE DISEASES	Art Unit	1636	Examiner Name	GUZO, DAVID	Attorney Docket No.	2204437.127 US1
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I hereby revoke all previous powers of attorney given in the above-identified application.

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Country: Telephone: Email:

I am the:

☐ Applicant/Inventor.
 OR
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	Date
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Title and Company	
EXECUTIVE DIRECTOR, SVP COMMERCIAL DEVELOPMENT	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. **OXGEO Biomedica (UK) LIMITED**

☐ "Total of 1 forms are submitted.